

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

Position(s) Applied for:	Date of Application:
How Did You Learn About Us? <input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Inquiry	<input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> Other: _____

Last	First	Middle	
Address	City	State	Zip
Telephone Number(s)	Social Security Number: 		

Best Time to Contact you at home is: _____ AM PM

If you are under 18 years of age,
can you provide required proof of
your eligibility to work?

☐ Yes ☐ No

Have you ever filed an application
with us before?

☐ Yes ☐ No

Have you ever been employed with
us before?

☐ Yes ☐ No

If Yes, give date: _____

Do you have any friends or relatives
other than spouse work for us?

☐ Yes ☐ No

If Yes, state name, relationship and location

Are you currently employed?

☐ Yes ☐ No

May we contact your employer?

☐ Yes ☐ No

Are you prevented from lawfully becoming employed in this country because of Visa or immigration Status?

☐ Yes ☐ No

***Proof of Citizenship or immigration status will be required upon employment*

Date available for work:

____/____/____

What is your desired salary range?

What are you available to work:

☐ Full Time
☐ Part Time
☐ Temporary
☐ Weekends

☐ Morning
☐ Afternoon
☐ Evening
☐ Holidays

What days are you available to work?

☐ Monday
☐ Tuesday
☐ Wednesday
☐ Sunday

☐ Thursday
☐ Friday
☐ Saturday

Are you currently on "lay-off" status
And subject to recall?

☐ Yes ☐ No

Can you travel if required for position?

☐ Yes ☐ No

Education

School	Name and Address	Course of Study	Years Completed	Diploma or Degree
High School				
Undergraduate College				
Graduate College				
Other (Specify)				

Work Experience

Employer		Dates Employed	
		To	From
Address			
Phone			
Supervisor			
Job Title		Hourly Rate	
		Starting	Final
Work Performed			
Reason for Leaving	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer		Dates Employed	
		To	From
Address			
Phone			
Supervisor			
Job Title		Hourly Rate	
		Starting	Final
Work Performed			
Reason for Leaving	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer		Dates Employed	
		To	From
Address			
Phone			
Supervisor			
Job Title		Hourly Rate	
		Starting	Final
Work Performed			
Reason for Leaving	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Comments: (Please use this space to explain any gaps in employment history

Please list and describe any specialized training, apprenticeship, skills and extra-curricular activities that related to position you are applying for.

Please list any job related training you received in the United States Military

Please list professional, trade, business or civic activities and offices held

****You may exclude memberships which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status****

Please list any additional qualifications and or additional information you feel may be helpful to us in considering your application

Note to applicant: DO NOT ANSWER THIS QUESITON UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.

☐ Yes ☐ No

Personal/Professional References:

Name	Phone	Occupation	Relationship

Applicant's Statement

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment for employment as may be necessary in arriving at employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "*at will*" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "*at will*" employment relationship may not be changed by any written document or by conduct unless, such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer

Applicant Signature

Date